06/10/2009 12:06

Image# 29934001744

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Pacific Life Insurance Company Political Action Committee 700 Newport Center Drive ADDRESS (number and street) Check if different than previously Newport Beach CA 92660 reported. (ACC) FEC IDENTIFICATION NUMBER STATE A ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00068528 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 05 0 1 2009 05 3 1 2009 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Robert Haskell Type or Print Name of Treasurer Electronically Filed by Robert Haskell 06 10 2009 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) OF RECEIPTS AND DISBURSEMENTS
Page 2

F	deport Covering the Period: From:		To: 0 5 3 1 2 0 0 9
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
3.	(a) Cash on Hand January 1 Ž00Š Y Y		37163.63
	(b) Cash on Hand at Begining of Reporting Period	25639.19	
	(c) Total Receipts (from Line 19)	26693.14	93668.70
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	52332.33	130832.33
7.	Total Disbursements (from Line 31)	18000.00	96500.00
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	34332.33	34332.33
Э.	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

Pacific Life Insurance Company Political Action Committee

0 1 3^D1 м м 0 5 2009 м м 0 5 2009 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 53669.90 22191.98 (i) Itemized (use Schedule A) 4501.16 39998.80 (ii) Unitemized (iii) TOTAL (add 26693.14 93668.70 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 26693.14 93668.70 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 26693.14 93668.70 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 26693.14 93668.70

(subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Operating Expenditures: (a) Shared Federal/Non-Federal		
Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	0.00
2. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	18000.00	96500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
77. Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
9. Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C 431(20))(a) Shared Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
21. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	18000.00	96500.00
22. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	18000.00	96500.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	26693.14	93668.70
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	26693.14	93668.70
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6/54 (check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Po	litical Action Co	ommittee	
Full Name (Last, First, Middle Initial) MR. THOMAS S BEADLESTON			Date of Receipt
Mailing Address 21 CYPRESS TREE	E LN		05 04 2009
City	State	Zip Code	Transaction ID: 7893809
IRVINE FEC ID number of contributing federal political committee.	CA	92612-2211	Amount of Each Receipt this Period 850.00
Name of Employer Pacific Life	Occupation Vice Pres		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 850.00	Check
Full Name (Last, First, Middle Initial) MR. DAVID R CARMICHAEL			Date of Receipt
Mailing Address 1525 SERENADE T	05 04 YYYYY		
City CORONA DEL MAR	State CA	Zip Code 92625-1753	Transaction ID: 7893846
FEC ID number of contributing federal political committee. Name of Employer Pacific Life Occupation Exec (Re		92023-1733	Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	Check
Full Name (Last, First, Middle Initial) MR. JEFFREY R DEY			Date of Receipt
Mailing Address 5 MAGNOLIA DR			05 04 2009
City LADERA RANCH	State CA	Zip Code 92694-0710	Transaction ID: 7893881
FEC ID number of contributing federal political committee.	C	92094-0710	Amount of Each Receipt this Period 1210.00
Name of Employer Pacific Life Occupation Asst. Vice		n e President	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1210.00	Check
SUBTOTAL of Receipts This Page (optional	<u> </u>		2310.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 54 (check only one) X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Pacific Life Insurance Company Politic	cal Action C	ommittee	
۷.	Full Name (Last, First, Middle Initial) MR. R. STEPHEN HANNAHS			Date of Receipt
	Mailing Address 740 VIA LIDO NORD			05 04 2009
	City	State	Zip Code	Transaction ID: 7893936
	NEWPORT BEACH	CA	92663-5523	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		800.00
	Name of Employer Pacific Life	Occupatio Director	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		800.00	Check
. –	Full Name (Last, First, Middle Initial) MR. GARY A HUGHES			Date of Receipt
	Mailing Address 139 TAROCCO	05 31 7 9 9 9		
	City	State	Zip Code	Transaction ID: 7893963
	IRVINE	CA	92618-0311	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Pacific Life	Occupatio Executive		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	300.00	Check
	Full Name (Last, First, Middle Initial) MS. KATHLEEN D SIMMONS			Date of Receipt
	Mailing Address 27403 HYATT CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 7894166
	LAGUNA NIGUEL	CA	92677-3700	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Pacific Life	Occupatio Asst. Vic	n ee President	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	Check
	SUBTOTAL of Receipts This Page (optional)			1600.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person g the name and address of any political committee to	n for the purpose of soliciting contributions
Pacific Life Insurance Company P	olitical Action Committee	
Full Name (Last, First, Middle Initial) MR. THOMAS C SUTTON		Date of Receipt
Mailing Address 111 SHORECLIFF	RD	05 31 2009
City	State Zip Code	Transaction ID: 7894177
CORONA DEL MAR	CA 92625-2646	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5000.00
Name of Employer Pacific Life	Occupation Chairman (Ret.)	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	Check
Full Name (Last, First, Middle Initial) MR. TODD E WOODWARD		Date of Receipt
Mailing Address 1907 BERYL LN	05 31 YYYY 2009	
City	State Zip Code	Transaction ID: 7894236
NEWPORT BEACH	CA 92660-4449	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Pacific Life	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Check
Full Name (Last, First, Middle Initial) MS. JUNE G ARCE		Date of Receipt
Mailing Address 20050 EMERALD	MEADOW DR	05 31 YYYY 2009
City	State Zip Code	Transaction ID: PR10362102945
WALNUT	CA 91789	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Pacific Life	Occupation DIR MKTG COMPL	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
SURTOTAL of Receipts This Page (ention	al)	5350.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	or for commercial purposes, other than using the	tatements may not be sold or used by any name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politic	cal Action Committee	
۷.	Full Name (Last, First, Middle Initial) MR. ANTHONY J BONNO		Date of Receipt
	Mailing Address 61 VERNAL SPG	State Zip Code	05 31 2009
	City IRVINE	State Zip Code CA 92603	Transaction ID: PR10362232945 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	400.00
	Name of Employer Pacific Life	Occupation SR VP HR, FAC & CORP TECH	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2000.00	P/R Deduction (\$400.00 Monthly)
_ В.	Full Name (Last, First, Middle Initial) MR. ALAN H BROWN		Date of Receipt
	Mailing Address 505 13TH ST	05 31 2009	
	City	State Zip Code	Transaction ID: PR10362252945
	HUNTINGTON BEACH	CA 92648	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	70.00
	Name of Employer Pacific Life	Occupation AVP ITS STRATEGIC SVCS	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$70.00 Mon-thly)
-).	Full Name (Last, First, Middle Initial) MR. DEWEY P BUSHAW		Date of Receipt
	Mailing Address 29132 ALFIERI ST	05 31 2009	
	City	State Zip Code	Transaction ID: PR10362302945
	LAGUNA NIGUEL FEC ID number of contributing federal political committee.	CA 92677	Amount of Each Receipt this Period 167.00
	Name of Employer Pacific Life	Occupation EXEC VP ANNUITIES	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 835.00	P/R Deduction (\$167.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional)	1	637.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 54 (check only one) X
A	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politic	cal Action Co	mmittee	
. ∠ \.	Full Name (Last, First, Middle Initial) MR. EDWARD R BYRD			Date of Receipt
	Mailing Address 17520 PAGE CT			05 31 7 2009
	City YORBA LINDA	State CA	Zip Code 92886	Transaction ID: PR10362322945 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	32000	90.00
	Name of Employer Pacific Life	Occupation SR VP &	CHF ACTG OFCR	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 450.00	P/R Deduction (\$90.00 Monthly)
	Full Name (Last, First, Middle Initial) MR. JOSEPH E CELENTANO			Date of Receipt
	Mailing Address 26661 CAMPESINO	05 31 2009		
	City	State	Zip Code	Transaction ID: PR10362382945
	MISSION VIEJO	CA	92691	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			100.00
	Name of Employer Pacific Life	Occupation SVP PRO	DD, RISK, FIN&INFO MGM	Г
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$100.00 Monthly)
 ;.	Full Name (Last, First, Middle Initial) MS. SHARON A CHEEVER			Date of Receipt
	Mailing Address 33512 VALLE RD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10362402945
	SN JUAN CAPISTRANO	CA	92675	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Pacific Life Occupation SR VP & GEN COUNSEL			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$100.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional)	1		290.00

Γ	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 54 (check only one) X 11a
C	any information copied from such Reports and r for commercial purposes, other than using th	Statements ma ne name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Polit	tical Action C	ommittee	
	Full Name (Last, First, Middle Initial) MS. GAIL C MOSCOSO			Date of Receipt
	Mailing Address 31558 WEST NINE D	05 31 YYYY 2009		
	City	State	Zip Code	Transaction ID: PR10362482945
	LAGUNA NIGUEL	CA	92677	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer Pacific Life	Occupation VP CLIE	n NT SERVICES	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$60.00 Mon-thly)
_	Full Name (Last, First, Middle Initial) MR. DENNIS M CORBETT			Date of Receipt
	Mailing Address 15136 TOURAINE W	05 31 2009		
	City	State	Zip Code	Transaction ID: PR10362512945
	IRVINE	CA	92604	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Pacific Life	Occupation VP TAX	n COMPLIANCE	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	P/R Deduction (\$100.00 Monthly)
_	Full Name (Last, First, Middle Initial) MR. PAUL J CROXTON			Date of Receipt
	Mailing Address 30132 HILLSIDE TER	3		05 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10362552945
	SN JUAN CAPISTRANO	CA	92675	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Pacific Life	Occupation FVP FIE	n LD WHOLESALING	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	P/R Deduction (\$50.00 Mon-thly)
Γ	SUBTOTAL of Receipts This Page (optional)	1		210.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 54 (check only one) X
A	ny information copied from such Reports and r for commercial purposes, other than using the	Statements ma	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Polit	ical Action C	ommittee	
	Full Name (Last, First, Middle Initial) MS. DEBRA CUNNINGHAM HONERKAMP			Date of Receipt
	Mailing Address 2712 LIGHTHOUSE	LN		05 31 YYYYY 2009
	City CORONA DEL MAR	State CA	Zip Code 92625	Transaction ID: PR10362562945 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Pacific Life	Occupatio AVP RE	n ASSET MGMT	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	P/R Deduction (\$75.00 Mon-thly)
_	Full Name (Last, First, Middle Initial) MR. MICHAEL R CURRY			Date of Receipt
	Mailing Address 12162 WICKLOW LN			05 31 2009
	City	State	Zip Code	Transaction ID: PR10362572945
	NAPLES FL FEC ID number of contributing federal political committee.		34120	Amount of Each Receipt this Period
				100.00
	Name of Employer Pacific Life	Occupatio FVP FIE	n LD WHOLESALING	
	Receipt For: Aggregat		e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	P/R Deduction (\$100.00 Monthly)
_	Full Name (Last, First, Middle Initial) MS. STEPHANIE J CURRY			Date of Receipt
	Mailing Address PO BOX 15358			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10362592945
	IRVINE	CA	92623	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		90.00
	Name of Employer Occupation AVP ADV		VANCED SALES	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 450.00	P/R Deduction (\$90.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)	•		265.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 17
4	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politic	cal Action Co	ommittee	
. ∠ \.	Full Name (Last, First, Middle Initial) MS. DIANE W DALES			Date of Receipt
	Mailing Address 28 CLERMONT			05 31 2009
	City	State CA	Zip Code	Transaction ID: PR10362602945
	NEWPORT COAST FEC ID number of contributing federal political committee.	C	92657	Amount of Each Receipt this Period 50.00
	Name of Employer Pacific Life	Occupation AVP CBF	n EDIT ANALYSIS	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
- 3.	Full Name (Last, First, Middle Initial) MS. LINDA D LARSON	1		Date of Receipt
	Mailing Address 8315 ROAD R NW	05 31 2009		
	City	State	Zip Code	Transaction ID: PR10362622945
	QUINCY	WA	98848	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			100.00
	Name of Employer Pacific Life	Occupation AVP IND	n COMPLIANCE	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$100.00 Monthly)
_	Full Name (Last, First, Middle Initial)			
;_	MR. MARK R FALK			Date of Receipt
	Mailing Address 64 SUMMERSTONE			05 / 31 / 2009
	City	State	Zip Code	Transaction ID: PR10362712945
	IRVINE	CA	92614	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer Occupation AVP STRATEG		n RATEGIC PROGRAMS	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/P Doduction (\$105.00 Mo
	Other (specify)		625.00	P/R Deduction (\$125.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)	<u> </u>		275.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 54 (check only one) X
Ai	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	Pacific Life Insurance Company Politic	cal Action Co	ommittee	
	Full Name (Last, First, Middle Initial) MS. MARTHA A GATES			Date of Receipt
	Mailing Address 31411 MONTEREY ST			05 31 7 2009
	City	State	Zip Code	Transaction ID: PR10362862945
	FEC ID number of contributing	CA	92651	Amount of Each Receipt this Period 170.00
	federal political committee.	Occupatio	n	_
	Name of Employer Pacific Life		PERATIONS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		850.00	P/R Deduction (\$170.00 Monthly)
-	Full Name (Last, First, Middle Initial) MR. FRANK J GOETZ			Date of Receipt
	Mailing Address 7 SOVENTE	05 31 2009		
	City	State	Zip Code	Transaction ID: PR10362902945
	IRVINE	CA	92606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		70.00
	Name of Employer Pacific Life	Occupatio AVP NE\	n W BUSINESS SVCS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		350.00	P/R Deduction (\$70.00 Mon- thly)
	Full Name (Last, First, Middle Initial) MS. MILDA C GOODMAN	1		Date of Receipt
	Mailing Address 310 ALISO AVE			05 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10362922945
	NEWPORT BEACH	CA	92663	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer Occupation Pacific Life AVP ADV & PUB RLTNS			7
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
5	SUBTOTAL of Receipts This Page (optional)			290.00

Γ	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A c	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politi	cal Action Co	ommittee	
	Full Name (Last, First, Middle Initial) MS. C MARLA GRAHAM			Date of Receipt
	Mailing Address 23672 BRASILIA ST			05 31 YYYY 2009
	City	State	Zip Code	Transaction ID: PR10362942945
	MISSION VIEJO FEC ID number of contributing	CA	92691	Amount of Each Receipt this Period
	federal political committee.	C		50.00
	Name of Employer Pacific Life	Occupatio MGR PR	n OJECT ANA & QA	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	P/R Deduction (\$50.00 Mon- thly)
_	Full Name (Last, First, Middle Initial) MR. ADRIAN S GRIGGS			Date of Receipt
	Mailing Address 8766 CANARY AVE			05 31 2009
	City	State	Zip Code	Transaction ID: PR10362962945
	FOUNTAIN VALLEY	CA	92708	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Pacific Life	Occupatio SVP FIN	n ANCE & COMPL	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	P/R Deduction (\$100.00 Monthly)
_	Full Name (Last, First, Middle Initial) MS. BRENDA K HARDWIG			Date of Receipt
	Mailing Address 13112 EARLHAM ST			05 31 2009
	City	State	Zip Code	Transaction ID: PR10363032945
	SANTA ANA	CA	92705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Pacific Life	Occupatio COMMU	n NITY RELTNS COORD	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	D/D Doduction (#50.00 Mg
	Other (specify)		250.00	P/R Deduction (\$50.00 Mon- thly)
		1		200.00

	EDULE A (FEC Form 3X NIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16
Any inf	formation copied from such Reports an commercial purposes, other than using	d Statements ma the name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
1	ME OF COMMITTEE (In Full) cific Life Insurance Company Po	litical Action C	ommittee	
	Name (Last, First, Middle Initial) . ROBERT G HASKELL			Date of Receipt
Mai	ling Address 1880 N EL CAMINO	REAL		05 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: PR10363062945
	N CLEMENTE	CA	92672	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		416.66
Nar Pad	me of Employer cific Life	Occupation SR VP F	on PUBLIC AFFAIRS	
Red	ceipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		2083.30	P/R Deduction (\$416.66 Monthly)
	Name (Last, First, Middle Initial)			Date of Receipt
	ling Address 1137 SUNSET CLIF	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City		State	Zip Code	Transaction ID: PR10363072945
<u>SA</u>	N DIEGO	CA	92107	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		74.00
Nar Pad	me of Employer cific Life	Occupation AVP INV	on /EST CNSL	
Rec	ceipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		370.00	P/R Deduction (\$74.00 Mon-thly)
	Name (Last, First, Middle Initial) . ROBERT J HEMSTEAD			Date of Receipt
	iling Address 310 E MCCOY LN			05 31 2009
City		State	Zip Code	Transaction ID: PR10363102945
<u>SA</u>	NTA MARIA	CA	93455	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		85.00
Nar Pad	me of Employer cific Life	Occupation AVP & V	on 'ALUATION ACTUARY	
Rec	ceipt For:		e Year-to-Date	
	Primary General Other (specify) ▼		425.00	P/R Deduction (\$85.00 Mon-thly)
	OTAL of Receipts This Page (optiona			575.66

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports or for commercial purposes, other than usin	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company F	Political Action Committee	
Full Name (Last, First, Middle Initial) MR. KEVIN A HENDRA		Date of Receipt
Mailing Address 58 VIAGGIO LN		05 31 YYYY 2009
City FOOTHILL RANCH	State Zip Code CA 92610	Transaction ID: PR10363112945 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Pacific Life	Occupation CORP TAX DIRECTOR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
Full Name (Last, First, Middle Initial) MR. HOWARD T HIRAKAWA		Date of Receipt
Mailing Address 23972 GOLDENE	05 31 7 2009	
City	State Zip Code	Transaction ID: PR10363162945
LAGUNA NIGUEL FEC ID number of contributing federal political committee.	CA 92677	Amount of Each Receipt this Period 100.00
Name of Employer Pacific Life	Occupation VP INV ADVISOR OPS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$100.00 Monthly)
Full Name (Last, First, Middle Initial) MR. CHRIS M JANOWIAK		Date of Receipt
Mailing Address 1260 CLEVELANI	D AVE APT C227	M·M / D·D / Y·Y·Y·Y 05 31 2009
City	State Zip Code	Transaction ID: PR10363232945
SAN DIEGO FEC ID number of contributing federal political committee.	CA 92103	Amount of Each Receipt this Period 60.00
Name of Employer Pacific Life	Occupation DIR CORP INTERNET STRATEGY	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$60.00 Mon-thly)
SUBTOTAL of Receipts This Page (option	nal)	210.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 54 (check only one) X 11a			
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions			
Pacific Life Insurance Company Politic	cal Action Co	ommittee				
Full Name (Last, First, Middle Initial) MS. CAROL A JENSEN			Date of Receipt			
Mailing Address 8554 202ND STREET	Mailing Address 8554 202ND STREET SW					
City	State	Zip Code	Transaction ID: PR10363242945			
EDMONDS	WA	98026	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		250.00			
Name of Employer Pacific Life	Occupation DIVISION					
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1250.00	P/R Deduction (\$250.00 Monthly)			
Full Name (Last, First, Middle Initial) MR. JEFF R JOHNSON			Date of Receipt			
Mailing Address 1 SAND OAKS RD.	05 31 2009					
City LAGUNA NIGUEL	State CA	Zip Code 92677	Transaction ID: PR10363252945			
FEC ID number of contributing federal political committee.	C	92011	Amount of Each Receipt this Period 50.00			
Name of Employer Pacific Life	Occupation AVP TRE	n EASURER PAF				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)			
Full Name (Last, First, Middle Initial) MR. KENT R JOHNSON			Date of Receipt			
Mailing Address 25621 DEL NORTE			05 31 YYYY 2009			
City	State	Zip Code	Transaction ID: PR10363262945			
LAGUNA NIGUEL	CA	92677	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		50.00			
Name of Employer Pacific Life	Occupation VP ACTU	n JARIAL & REINS				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Monthly)			
SUBTOTAL of Receipts This Page (optional)			350.00			
TOTAL This Period (last page this line number	only)	·				

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate sche for each category o Detailed Summary	f the Cirieck of hy of he
Ai	ny information copied from such Reports and for commercial purposes, other than using th	Statements may not be sold or used be name and address of any political co	y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Polit	cal Action Committee	
	Full Name (Last, First, Middle Initial) MR. MARK J JOHNSON		Date of Receipt
	Mailing Address 1812 LEADBURN RD		05 31 2009
	City TOWSON	State Zip Code MD 21204	Transaction ID: PR10363272945 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer Pacific Life	Occupation FVP FIELD WHOLESALING	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$125.00 Monthly)
_	Full Name (Last, First, Middle Initial) MR. SCOTT E JOHNSON	I	Date of Receipt
	Mailing Address 906 NEWTON LN		05 31 YYYY 2009
	City	State Zip Code	Transaction ID: PR10363282945
	PLACENTIA FEC ID number of contributing federal political committee.	CA 92870	Amount of Each Receipt this Period 80.00
	Name of Employer Pacific Life	Occupation VP CORP APPL SYSTEMS	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	P/R Deduction (\$80.00 Mon-thly)
	Full Name (Last, First, Middle Initial) MS. SUZANNE T KAMPA	1	Date of Receipt
	Mailing Address 5531 STANFORD AV	E	05 31 2009
	City	State Zip Code	Transaction ID: PR10363322945
	GARDEN GROVE FEC ID number of contributing federal political committee.	CA 92845	Amount of Each Receipt this Period 60.00
	Name of Employer Pacific Life	Occupation IT AUDIT CONS	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$60.00 Mon-thly)
	UBTOTAL of Receipts This Page (optional) .		265.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 54 (check only one) X			
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions			
Pacific Life Insurance Company Politic	al Action Co	ommittee	_			
Full Name (Last, First, Middle Initial) MR. BRIAN D KLEMENS			Date of Receipt			
Mailing Address 24611 BENJAMIN CIR	Mailing Address 24611 BENJAMIN CIR					
City	State	Zip Code	Transaction ID: PR10363372945			
DANA POINT FEC ID number of contributing federal political committee.	CA	92629	Amount of Each Receipt this Period 80.00			
Name of Employer Pacific Life	Occupation VP COR	n PORATE CONTROLLER				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00	P/R Deduction (\$80.00 Mon-thly)			
Full Name (Last, First, Middle Initial) MR. JOHN P KONTOS			Date of Receipt			
Mailing Address 6307 CAMINO MARINI	05 31 7 2009					
City SAN CLEMENTE	State CA	Zip Code 92673	Transaction ID: PR10363422945 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	125.00			
Name of Employer Pacific Life	Occupation VP KEY	n ACCOUNT MKTG				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 625.00	P/R Deduction (\$125.00 Monthly)			
Full Name (Last, First, Middle Initial) MS. JODY L LINNEMAN			Date of Receipt			
Mailing Address 262 S FAIRFIELD LN			05 31 Y Y Y Y Y Y Y Y Y			
City	State	Zip Code	Transaction ID: PR10363452945			
ORANGE	CA	92869	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		75.00			
Name of Employer Pacific Life	, '	EST CNSL				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	P/R Deduction (\$75.00 Mon-thly)			
SUBTOTAL of Receipts This Page (optional)			280.00			
TOTAL This Period (last page this line number of		•				

ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21/54 (check only one) X 11a
Any information copied from such Reports are or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Po	olitical Action Co	ommittee	
Full Name (Last, First, Middle Initial) MR. FLETCHER C LARSON			Date of Receipt
Mailing Address 709 AVENIDA MIR	OLA		05 31 2009
City PALOS VERDES EST	State CA	Zip Code 90274	Transaction ID: PR10363472945 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	90274	400.00
Name of Employer Pacific Life	Occupation REGION		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00	P/R Deduction (\$400.00 Monthly)
Full Name (Last, First, Middle Initial) MR. DAVID LAWS			Date of Receipt
Mailing Address 10935 E BERRY A	05 31 YYYYY 2009		
City ENGLEWOOD	State CO	Zip Code 80111	Transaction ID: PR10363482945 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Pacific Life	Occupation REGION		7
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	P/R Deduction (\$100.00 Monthly)
Full Name (Last, First, Middle Initial) MS. LAURENE E MAC ELWEE			Date of Receipt
Mailing Address 1033 SECRETARIA	AT CIR		05 31 2009
City COSTA MESA	State CA	Zip Code 92626	Transaction ID: PR10363562945
FEC ID number of contributing federal political committee.	C	32020	Amount of Each Receipt this Period 100.00
Name of Employer Pacific Life	Occupation AVP VAF	n RIABLE REG COMPL	7
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	P/R Deduction (\$100.00 Monthly)
SUBTOTAL of Receipts This Page (optional	al)		600.00

SCHEDULE A (FEC FO	rm 3X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such R or for commercial purposes, other the	eports and Statements may not be sold or used by any perso an using the name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full Pacific Life Insurance Comp) pany Political Action Committee	
Full Name (Last, First, Middle Ini MR. DESMOND G MARSH	tial)	Date of Receipt
Mailing Address 74 SETON	RD	05 31 2009
City <u>IRVINE</u>	State Zip Code CA 92612	Transaction ID: PR10363592945 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer Pacific Life	Occupation AVP ANNUITY APPS ADMIN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$120.00 Monthly)
Full Name (Last, First, Middle Ini	tial)	Date of Receipt
Mailing Address 7406 PALO	MA DR	05 31 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR10363602945
HUNTINGTON BEACH FEC ID number of contributing federal political committee.	CA 92648	Amount of Each Receipt this Period 50.00
Name of Employer Pacific Life	Occupation VP GOVT RELNS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
Full Name (Last, First, Middle Ini MS. GAIL H MC INTOSH	tial)	Date of Receipt
Mailing Address 622 18TH S	Т	05 31 2009
City	State Zip Code	Transaction ID: PR10363612945
HUNTINGTON BEACH FEC ID number of contributing federal political committee.	CA 92648	Amount of Each Receipt this Period 80.00
Name of Employer Pacific Life	Occupation AVP INS CNSL	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$80.00 Mon-thly)
CUPTOTAL of Descriptor This Descriptor	e (optional)	250.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 54 (check only one) X 11a
4	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politic	cal Action Co	ommittee	
. ∠ 4.	Full Name (Last, First, Middle Initial) MS. JULIA C MC KINNEY			Date of Receipt
	Mailing Address 3615 PASEO DEL CA	MPO		05 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City PALOS VERDES EST	State CA	Zip Code 90274	Transaction ID: PR10363632945 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Pacific Life	Occupatio AVP INS		
	Receipt For: Primary General Other (specify) ▼	+ +	e Year-to-Date ▼ 375.00	P/R Deduction (\$75.00 Mon-thly)
- 3.	Full Name (Last, First, Middle Initial) MR. MORGAN C MC KNIGHT Mailing Address 1217 HIGHCREST DF	}		Date of Receipt
	City	State	Zip Code	0 5 3 1 2 0 0 9 Transaction ID: PR10363642945
	BURLESON	TX	76028	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Pacific Life	Occupatio APPLIC	n DEV CONS	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
_	Full Name (Last, First, Middle Initial) MR. HENRY M MC MILLAN			Date of Receipt
-	Mailing Address 4006 INLET ISLE DR			05 31 2009
	City	State	Zip Code	Transaction ID: PR10363662945
	CORONA DEL MAR FEC ID number of contributing federal political committee.	CA	92625	Amount of Each Receipt this Period 100.00
	Name of Employer Pacific Life	Occupatio	n CHIEF RISK OFCR	
	Receipt For: Primary General Other (specify)	, '	e Year-to-Date ▼ 500.00	P/R Deduction (\$100.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)	1		225.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 54 (check only one) X
Ai	ny information copied from such Reports and S for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politic	cal Action Co	ommittee	
	Full Name (Last, First, Middle Initial) MS. AUDREY L MILFS			Date of Receipt
	Mailing Address 26922 ROCKING HOP	RSE LN		05 31 2009
	City	State CA	Zip Code	Transaction ID: PR10363712945
	LAGUNA HILLS FEC ID number of contributing federal political committee.	C	92653	Amount of Each Receipt this Period 250.00
	Name of Employer Pacific Life	Occupatio	n CRETARY	
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 1250.00	P/R Deduction (\$250.00 Monthly)
_	Full Name (Last, First, Middle Initial) MR. JOSE T MISCOLTA			Date of Receipt
	Mailing Address 20 BRYCE CYN			05 31 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10363752945
	ALISO VIEJO	CA	92656	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		65.00
	Name of Employer Pacific Life	Occupatio AVP PRO	n OD & PORT MKTG	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 325.00	P/R Deduction (\$65.00 Mon-thly)
	Full Name (Last, First, Middle Initial) MS. ELIZABETH A MOORE	1		Date of Receipt
	Mailing Address 6412 N 159TH ST			05 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10363762945
	OMAHA FEC ID number of contributing federal political committee.	C	68116	Amount of Each Receipt this Period 45.00
	Name of Employer Pacific Life	Occupatio	n IS ANALYSIS CONS	
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 225.00	P/R Deduction (\$45.00 Mon-thly)
Ģ	SUBTOTAL of Receipts This Page (optional)	1		360.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25/54 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Po			
Full Name (Last, First, Middle Initial) MR. JAMES T MORRIS			Date of Receipt
Mailing Address 29022 PINTAIL CIF	3		05 31 2009
City	State	Zip Code	Transaction ID: PR10363792945
LAGUNA NIGUEL	CA	92677	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		416.00
Name of Employer Pacific Life	Occupation CHAIRM	n AN, PRESIDENT & CEO	7
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00	P/R Deduction (\$416.00 Monthly)
Full Name (Last, First, Middle Initial) MR. JOHN C MULVIHILL			Date of Receipt
Mailing Address 27822 HOMESTEA	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: PR10363802945
LAGUNA NIGUEL	CA	92677	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		175.00
Name of Employer Pacific Life	Occupation VP RE A	n SSET MGMT	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	875.00	P/R Deduction (\$175.00 Monthly)
Full Name (Last, First, Middle Initial) MR. RICHARD P OLSON			Date of Receipt
Mailing Address 24852 CAMBERWE	ELL ST		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: PR10363932945
LAGUNA HILLS	CA	92653	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer Pacific Life		CURITY SVCS	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	P/R Deduction (\$50.00 Mon- thly)
	J)		641.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 54 (check only one) X 11a
A C	Any information copied from such Reports and or for commercial purposes, other than using th	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Polit	ical Action C	ommittee	
	Full Name (Last, First, Middle Initial) MS. JOYCE J PEAD			Date of Receipt
	Mailing Address 25 SUNRISE			05 31 7 2009
	City IRVINE	State CA	Zip Code 92603	Transaction ID: PR10364002945 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	02000	50.00
	Name of Employer Pacific Life	Occupatio AVP HR	n CONSULTING	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
	Full Name (Last, First, Middle Initial) MS. ALYCE PETERSON			Date of Receipt
	Mailing Address 2908 VIA HIDALGO			05 31 YYYY 2009
	City	State	Zip Code	Transaction ID: PR10364022945
	SAN CLEMENTE	CA	92673	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Pacific Life	Occupatio VP MAR	n KETING SVCS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		375.00	P/R Deduction (\$75.00 Mon- thly)
_	Full Name (Last, First, Middle Initial) MR. THEODORE A PREMER	1		Date of Receipt
	Mailing Address 20 MOLINO			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10364082945
	NEWPORT BEACH	CA	92660	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer Pacific Life	-, -	L ESTATE FINANCE	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	P/R Deduction (\$150.00 Monthly)
	SUBTOTAL of Receipts This Page (optional) .	1		275.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 17
0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politic	cal Action Co	ommittee	
. ∠ \.	Full Name (Last, First, Middle Initial) MR. JAMES R RICE			Date of Receipt
	Mailing Address 11 STILLWATER			05 31 2009
	City IRVINE	State CA	Zip Code 92603	Transaction ID: PR10364142945 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		110.00
	Name of Employer Pacific Life	Occupation VP M FIN	n NANCIAL DISTRIBUTION	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 550.00	P/R Deduction (\$110.00 Monthly)
 3.	Full Name (Last, First, Middle Initial) MR. RICHARD J SCHINDLER Mailing Address 28792 APPLETREE			Date of Receipt
	City	State	Zip Code	05 31 2009
	MISSION VIEJO	CA	92692	Transaction ID: PR10364262945 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Pacific Life	Occupation SR VP I	n IFE CHF MKTG OFCR	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1250.00	P/R Deduction (\$250.00 Monthly)
_).	Full Name (Last, First, Middle Initial) MS. CATHY L SCHWARTZ	1		Date of Receipt
-	Mailing Address 87 PELICAN CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10364312945
	NEWPORT BEACH FEC ID number of contributing federal political committee.	CA	92660	Amount of Each Receipt this Period 100.00
	Name of Employer Pacific Life	Occupation AVP CRE	n EDIT ANALYSIS	
	Receipt For: Primary General Other (specify)		Year-to-Date ▼ 500.00	P/R Deduction (\$100.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)			460.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports or for commercial purposes, other than us NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persoing the name and address of any political committee to	n for the purpose of soliciting contributions
Pacific Life Insurance Company	Political Action Committee	_
Full Name (Last, First, Middle Initial) MR. BRADLEY W SHERRELL		Date of Receipt
Mailing Address 2315 VIA ZAFIR		05 31 7 2009
City SAN CLEMENTE	State Zip Code CA 92673	Transaction ID: PR10364352945 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Pacific Life	Occupation AVP TECH OFFICE	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
Full Name (Last, First, Middle Initial) MS. PENNY S SPARKS		Date of Receipt
Mailing Address 1661 UTAH CIR		05 31 2009
City	State Zip Code	Transaction ID: PR10364442945
COSTA MESA FEC ID number of contributing federal political committee.	CA 92626	Amount of Each Receipt this Period 50.00
Name of Employer Pacific Life	Occupation DIR PORTFOLIO OPS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
Full Name (Last, First, Middle Initial) MS. CAROL R SUDBECK		Date of Receipt
Mailing Address 11 SOMMET		05 31 2009
City	State Zip Code	Transaction ID: PR10364502945
NEWPORT COAST FEC ID number of contributing federal political committee.	CA 92657	Amount of Each Receipt this Period 100.00
Name of Employer Pacific Life	Occupation VP TALENT ACQ & DEV	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$100.00 Monthly)
SUPTOTAL of Pagainte This Paga (anti-	onal)	200.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 54 (check only one) X
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politi	cal Action Co	ommittee	
	Full Name (Last, First, Middle Initial) MR. JOHN G TORELL			Date of Receipt
	Mailing Address 355 S LORETTA DR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City ORANGE	State CA	Zip Code 92869	Transaction ID: PR10364582945 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	32003	85.00
	Name of Employer Pacific Life	Occupation VP ACC	n TG & RPTG	
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 425.00	P/R Deduction (\$85.00 Mon-thly)
- 3.	Full Name (Last, First, Middle Initial) MR. STEPHEN J TORETTO Mailing Address 22862 ORENSE			Date of Receipt
	City	State	Zip Code	05 31 2009
	MISSION VIEJO	CA	92691	Transaction ID: PR10364592945 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		55.00
	Name of Employer Pacific Life	Occupation VP & INS	n SURANCE COUNSEL	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 275.00	P/R Deduction (\$55.00 Mon-thly)
	Full Name (Last, First, Middle Initial) MR. KHANH T TRAN			Date of Receipt
	Mailing Address 47 VERNAL SPG			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10364602945
	IRVINE FEC ID number of contributing federal political committee.	CA	92603	Amount of Each Receipt this Period 416.66
	Name of Employer Pacific Life	Occupation EXEC VI		
	Receipt For: Primary General Other (specify)	+ +	e Year-to-Date ▼ 2083.30	P/R Deduction (\$416.66 Monthly)
Γ,	SUBTOTAL of Receipts This Page (optional)	ı		556.66

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 54 (check only one) X
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any personderss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Pacific Life Insurance Company Politi	cal Action Co	ommittee	
	Full Name (Last, First, Middle Initial) MS. SUSAN L TULLY			Date of Receipt
	Mailing Address 6929 N HAYDEN RD			05 31 2009
	City SCOTTSDALE	State AZ	Zip Code 85250	Transaction ID: PR10364612945 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00200	60.00
	Name of Employer Pacific Life	Occupatio SR WHO	n DLESALER	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 300.00	P/R Deduction (\$60.00 Mon-thly)
. –	Full Name (Last, First, Middle Initial) MR. EDDIE D TUNG			Date of Receipt
	Mailing Address PO BOX 10386			05 31 2009
	City	State	Zip Code	Transaction ID: PR10364622945
	NEWPORT BEACH	CA	92658	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		70.00
	Name of Employer Pacific Life		GULATORY PROD ACCTG	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	P/R Deduction (\$70.00 Mon-thly)
_	Full Name (Last, First, Middle Initial) MS. CATHRYN L VAN WEY	_		Date of Receipt
	Mailing Address 41974 CARSON CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10364632945
	MURRIETA	CA	92562	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer Pacific Life		TL ACCTS & BD SVCS	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)			180.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 54 (check only one) X
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements mand and and	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
\geq	Pacific Life Insurance Company Politic	al Action Co	ommittee	
	Full Name (Last, First, Middle Initial) MR. JOHN M WALDECK			Date of Receipt
	Mailing Address 67 LAURELHURST DF			05 31 2009
	City LADERA RANCH	State CA	Zip Code 92694	Transaction ID: PR10364652945 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer Pacific Life	Occupatio VP RE U	n WG & CONST SVCS	
	Receipt For: Primary General Other (specify) ▼	. '	e Year-to-Date ▼ 625.00	P/R Deduction (\$125.00 Monthly)
	Full Name (Last, First, Middle Initial) MS. NANCY A WEBB			Date of Receipt
	Mailing Address 36 BLACK HAWK			05 31 7 2009
	City IRVINE	State CA	Zip Code 92603	Transaction ID: PR10364702945
	FEC ID number of contributing federal political committee.	C	92000	Amount of Each Receipt this Period 100.00
	Name of Employer Pacific Life	Occupatio VP FINA		
	Receipt For: Primary General Other (specify) ▼	. '	e Year-to-Date ▼ 500.00	P/R Deduction (\$100.00 Monthly)
	Full Name (Last, First, Middle Initial) MR. JOHN WHITE			Date of Receipt
	Mailing Address 32122 VIA CARLOS			M·M / D·D / Y·Y·Y·Y O 0 5 3 1 2 0 0 9
	City SN JUAN CAPISTRANO	State CA	Zip Code 92675	Transaction ID: PR10364742945
	FEC ID number of contributing federal political committee.	C	92073	Amount of Each Receipt this Period
	Name of Employer Pacific Life	Occupatio VP SALE		
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 500.00	P/R Deduction (\$100.00 Monthly)
- CI	UBTOTAL of Receipts This Page (optional)	ı		325.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 54 (check only one) X
,	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Polit	ical Action C	ommittee	
	Full Name (Last, First, Middle Initial) MS. ROBIN S YONIS			Date of Receipt
	Mailing Address 8 CASTLEBAR			05 31 2009
	City IRVINE	State CA	Zip Code	Transaction ID: PR10364822945
	FEC ID number of contributing federal political committee.	C	92618	Amount of Each Receipt this Period 50.00
	Name of Employer Pacific Life	Occupatio	n REGULATORY COMPL	
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	P/R Deduction (\$50.00 Mon- thly)
_	Full Name (Last, First, Middle Initial) MS. MARIA ZAMBELLI-DOUGHERTY			Date of Receipt
	Mailing Address 525 LOMBARDY RD	05 31 2009		
	City	State	Zip Code	Transaction ID: PR10364832945
	DREXEL HILL	PA	19026	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer Pacific Life	Occupation SUPR O	n PERATIONS	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$60.00 Mon-thly)
_	Full Name (Last, First, Middle Initial) MR. MICHAEL J WAUTERS			Date of Receipt
	Mailing Address 2942 COPA DE ORC	DR		05 31 2009
	City	State	Zip Code	Transaction ID: PR10365122945
	LOS ALAMITOS	CA	90720	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		0.00
	Name of Employer Pacific Life	- '	ANCIAL OPS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 220.00	P/R Deduction (\$0.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)	1		110.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 54 (check only one) X
Any information copied from such Report or for commercial purposes, other than to NAME OF COMMITTEE (In Full) Pacific Life Insurance Company	ts and Statements may not be sold or used by any perso using the name and address of any political committee to y Political Action Committee	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) MR. MICHAEL A BELL Mailing Address - A RRECURIOS		Date of Receipt
Mailing Address 2 PRECIPICE City LAGUNA NIGUEL	State Zip Code CA 92677	Transaction ID: PR10365142945 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Pacific Life Receipt For: Primary General Other (specify) ▼	Occupation EVP LIFE INSURANCE Aggregate Year-to-Date ▼ 1500.00	P/R Deduction (\$300.00 Monthly)
Full Name (Last, First, Middle Initial) MR. REED J LLOYD Mailing Address 6 SANDERLING	G LN	Date of Receipt 0 5 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ALISO VIEJO	State Zip Code CA 92656	Transaction ID: PR10365212945 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	65.00
Name of Employer Pacific Life	Occupation AVP ADVANCED MKTG	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	P/R Deduction (\$65.00 Mon-thly)
Full Name (Last, First, Middle Initial) MR. PHILIP A TEETER		Date of Receipt
Mailing Address 376 MYRTLE S	T	05 / 31 / 2009
City LAGUNA BEACH	State Zip Code CA 92651	Transaction ID: PR10365472945 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Pacific Life	Occupation VP ANN TECHNOLOGY	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	P/R Deduction (\$150.00 Monthly)
SUPTOTAL of Possints This Page (on	tional)	515.00

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information for for comm	ation copied from such Reports and S nercial purposes, other than using the	tatements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\	OF COMMITTEE (In Full) Life Insurance Company Politic	cal Action Co	ommittee	
	ne (Last, First, Middle Initial) HARD G CHERNEY			Date of Receipt
Mailing /	Address 27835 HOMESTEAD F	RD		05 31 7 2009
City <u>LAGUN</u>	NA NIGUEL	State CA	Zip Code 92677	Transaction ID: PR10365542945 Amount of Each Receipt this Period
	number of contributing political committee.	C		50.00
Name of Pacific L	Employer ife	Occupatio EXEC VI	n P GLOBAL MARKETING	
	For: imary General ther (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
	ne (Last, First, Middle Initial) REN S WALL			Date of Receipt
Mailing /	Address 1811 RIVERFORD RD	05 31 2009		
City	.,	State	Zip Code	Transaction ID: PR10365582945
TUSTII FEC ID federal p	number of contributing political committee.	CA	92780	Amount of Each Receipt this Period 50.00
Name of Pacific I	Employer life	Occupatio SYS ANA	n ALYSIS DIR	
	For: imary General ther (specify) ▼		e Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
	ne (Last, First, Middle Initial) NNYSON S OYLER	l		Date of Receipt
	Address 112 CLEARBROOK			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	_	State	Zip Code	Transaction ID: PR10365612945
	= number of contributing political committee.	CA	92614	Amount of Each Receipt this Period 50.00
Name of Pacific L	f Employer ife	Occupatio AVP PUE	n BLIC AFFAIRS	
	For: imary General ther (specify) ▼	, '	e Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
SUBTOTA	L of Receipts This Page (optional)			150.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 54 (check only one) X
A	Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politi	ical Action Co	ommittee	
∠ \ .	Full Name (Last, First, Middle Initial) MR. WILLIAM D COTTON			Date of Receipt
	Mailing Address 703 KAHN PL			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State VA	Zip Code	Transaction ID: PR10365622945
	ALEXANDRIA FEC ID number of contributing federal political committee.	C	22314	Amount of Each Receipt this Period 50.00
	Name of Employer Pacific Life	Occupation SR WHO	n DLESALER	
	Receipt For: Primary General Other (specify) ▼	1	Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
_ 3.	Full Name (Last, First, Middle Initial) MS. VALERIE MORRIS			Date of Receipt
	Mailing Address 48 W YALE LOOP	05 31 YYYY 2009		
	City	State	Zip Code	Transaction ID: PR10365682945
	IRVINE	CA	92604	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		90.00
	Name of Employer Pacific Life	Occupation VP HR P	n RGMS & SVCS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	P/R Deduction (\$90.00 Mon-thly)
_ ;.	Full Name (Last, First, Middle Initial) MS. PATRICIA S DOUGLASS	1		Date of Receipt
-	Mailing Address 640 SAINT JAMES R	D		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10365732945
	NEWPORT BEACH FEC ID number of contributing federal political committee.	CA	92663	Amount of Each Receipt this Period 225.00
	Name of Employer Pacific Life	Occupation		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1125.00	P/R Deduction (\$225.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional) .			365.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16
An	y information copied from such Reports and for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	e name and addre	ess of any political committee to	on for the purpose of soliciting contributions
	Pacific Life Insurance Company Polit	ical Action Com	nmittee	
<u>/</u>	Full Name (Last, First, Middle Initial) MR. WILLIAM D BURKE			Date of Receipt
	Mailing Address 2216 NELDA WAY		7.0	05 31 2009
	City ALAMO	State CA	Zip Code 94507	Transaction ID: PR10365782945 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	J-507	100.00
	Name of Employer Pacific Life	Occupation REGIONAL	_ VP	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 500.00	P/R Deduction (\$100.00 Monthly)
	Full Name (Last, First, Middle Initial) MR. RODERICK P HANSEN	<u> </u>		Date of Receipt
	Mailing Address 21612 MARIGOT DR	05 31 2009		
	City	State	Zip Code	Transaction ID: PR10365852945
	BOCA RATON	FL	33428	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Pacific Life	Occupation REGIONAL	_ VP	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 500.00	P/R Deduction (\$100.00 Monthly)
	Full Name (Last, First, Middle Initial) MR. JOHN F O'DONNELL			Date of Receipt
	Mailing Address 30 BRIAN RD			05 / 31 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10365962945
	BRIDGEWATER	MA	02324	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Pacific Life	Occupation DIVISION		
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 500.00	P/R Deduction (\$100.00 Monthly)
SI	UBTOTAL of Receipts This Page (optional)	1		300.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 54 (check only one) X
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	Pacific Life Insurance Company Politi	cal Action C	ommittee	
	Full Name (Last, First, Middle Initial) MS. JULIET A PINKERTON			Date of Receipt
	Mailing Address 22 N PALMIERA CIR			05 31 2009
	City	State	Zip Code	Transaction ID: PR10365992945
	THE WOODLANDS FEC ID number of contributing federal political committee.	C	77382	Amount of Each Receipt this Period 250.00
	Name of Employer Pacific Life	Occupation REGION		
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 1250.00	P/R Deduction (\$250.00 Monthly)
_	Full Name (Last, First, Middle Initial) MR. RICHARD A TAUBE			Date of Receipt
	Mailing Address 24081 NUTHATCH LN	١		05 31 YYYY 2009
	City	State	Zip Code	Transaction ID: PR10366042945
	LAGUNA NIGUEL	CA	92677	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Pacific Life	Occupation VP PRO	n DUCT MGMT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	P/R Deduction (\$75.00 Mon-thly)
_	Full Name (Last, First, Middle Initial) MR. TRAVIS R MC KAY	<u> </u>		Date of Receipt
	Mailing Address 15222 LINCOLNWAY	CIR		05 31 YYYY 2009
	City	State	Zip Code	Transaction ID: PR10366062945
	PLAINFIELD	IL	60544	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Pacific Life	Occupation SR WHC	n DLESALER	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	P/R Deduction (\$100.00 Monthly)
	SUBTOTAL of Receipts This Page (optional) .	1		425.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 54 (check only one) X
A	Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Poli	tical Action C	ommittee	
. ∠ \.	Full Name (Last, First, Middle Initial) MS. KATHARINE B YOUNG			Date of Receipt
	Mailing Address 18647 SANTA ISADO	ORA ST		05 / 31 / 2009
	City FOUNTAIN VALLEY	State CA	Zip Code 92708	Transaction ID: PR10366102945 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	32700	80.00
	Name of Employer Pacific Life	Occupatio AVP VAI	n _ & RISK MGMT	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 400.00	P/R Deduction (\$80.00 Mon-thly)
 3.	Full Name (Last, First, Middle Initial) MR. CHRISTOPHER VAN MIERLO Mailing Address 400 EL VUELO			Date of Receipt
	City	State	Zip Code	05 31 2009
	SAN CLEMENTE	CA	92672	Transaction ID: PR10366152945 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer Pacific Life	Occupatio SR VP A	n MF CHF MKTG OFCR	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	P/R Deduction (\$60.00 Mon-thly)
 ;_	Full Name (Last, First, Middle Initial) MR. MICHAEL S ROBB			Date of Receipt
	Mailing Address 27481 VANTAGE CI	RCLE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10366192945
	SN JUAN CAPISTRANO FEC ID number of contributing federal political committee.	CA	92675	Amount of Each Receipt this Period 250.00
	Name of Employer Pacific Life	Occupatio EXEC VI	n P RE INVEST	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1250.00	P/R Deduction (\$250.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)	1		390.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 54 (check only one) X
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politic	e name and add	dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS. JANE K WONG-HSU			Date of Receipt
Mailing Address 1121 EBBTIDE RD			05 31 2009
City	State	Zip Code	Transaction ID: PR10366212945
CORONA DEL MAR	CA	92625	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer Pacific Life	Occupation VP MKT	n & CREDIT RISK	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
Full Name (Last, First, Middle Initial) MR. MICHAEL P BORGATTI			Date of Receipt
Mailing Address 978 BALD CYPRESS	DR		05 31 YYYYY 2009
City	State	Zip Code	Transaction ID: PR10366242945
MANDEVILLE	LA	70448	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer Pacific Life	Occupation SR WHC	n DLESALER	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	250.00	P/R Deduction (\$50.00 Mon- thly)
Full Name (Last, First, Middle Initial) MR. RICHARD M WILKES			Date of Receipt
Mailing Address 7124 HAWKSBEARD			05 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: PR10366272945
WESTERVILLE	OH	43082	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Pacific Life	Occupation SR WHC	n DLESALER	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	P/R Deduction (\$100.00 Monthly)
	-		200.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 54 (check only one) X
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politi	cal Action C	ommittee	
∠ \ .	Full Name (Last, First, Middle Initial) MR. RICHARD S BANNO			Date of Receipt
	Mailing Address 26666 WHITE OAKS	DR		05 31 7 2009
	City	State	Zip Code	Transaction ID: PR10366282945
	LAGUNA HILLS	CA	92653	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Pacific Life	Occupation AVP CAI	n PITAL MKTS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		375.00	P/R Deduction (\$75.00 Mon-thly)
. –	Full Name (Last, First, Middle Initial) MS. MARY ANN BROWN			Date of Receipt
	Mailing Address 304 WEYMOUTH PL			05 31 7 2009
	City	State	Zip Code	Transaction ID: PR10366312945
	LAGUNA BEACH	CA	92651	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		416.66
	Name of Employer Pacific Life	Occupation SR VP C	n CORP DEVELPMT	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		2083.30	P/R Deduction (\$416.66 Monthly)
_	Full Name (Last, First, Middle Initial) MR. SIMON S FENG			Date of Receipt
	Mailing Address 10 CANDELA			05 31 2009
	City	State	Zip Code	Transaction ID: PR10366352945
	IRVINE	CA	92620	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer Pacific Life	Occupation AVP BUS	n S & TECH INTEG	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	P/R Deduction (\$150.00 Mo-
	Other (specify)		750.00	nthly)
	SUBTOTAL of Receipts This Page (optional) .			641.66

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 54 (check only one) X 11a
4	Any information copied from such Reports and sor for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politi	ical Action C	ommittee	
. <u>د</u> ۱.	Full Name (Last, First, Middle Initial) MR. THOMAS GIBBONS			Date of Receipt
	Mailing Address 3010 PARK NEWPOR	RT		05 31 2009
	City	State	Zip Code	Transaction ID: PR10366362945
	NEWPORT BEACH	CA	92660	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		180.00
	Name of Employer Pacific Life	Occupatio VP TAX	n	
	Receipt For:	1	e Year-to-Date V	
	Primary General Other (specify) ▼		900.00	P/R Deduction (\$180.00 Monthly)
_	Full Name (Last, First, Middle Initial) MS. MARY M HAWKINS			Date of Receipt
	Mailing Address 6182 S 177TH ST			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10366392945
	OMAHA	NE	68135	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		45.00
	Name of Employer Pacific Life	Occupatio AVP OPS	n S BUS SOLUTNS	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		225.00	P/R Deduction (\$45.00 Mon-thly)
_	Full Name (Last, First, Middle Initial) MR. JAMES KARAFA			Date of Receipt
	Mailing Address 182 STANHOPE RD			05 31 2009
	City	State	Zip Code	Transaction ID: PR10366402945
	SPARTA	NJ	07871	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Pacific Life	Occupatio REGION		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	P/R Deduction (\$100.00 Monthly)
Γ	SUBTOTAL of Receipts This Page (optional) .			325.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may he name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Poli	tical Action Co	ommittee	
Full Name (Last, First, Middle Initial) MR. DENNIS L BAHLMANN			Date of Receipt
Mailing Address 6052 MEADOW VIE	W CT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City JOHNSTON	State IA	Zip Code 50131	Transaction ID: PR10366622945 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer Pacific Life	Occupation AVP NE\	n W BUSINESS SVCS	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
Full Name (Last, First, Middle Initial) MR. JEFF J BRADSHAW			Date of Receipt
Mailing Address 27302 MONDANO D)R		05 7 31 7 2009
City MISSION VIEJO	State CA	Zip Code 92692	Transaction ID: PR10366672945 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	72032	50.00
Name of Employer Pacific Life	Occupation AVP BUS	n SINESS DEV	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
Full Name (Last, First, Middle Initial) MS. DEBORAH K JOHNSON			Date of Receipt
Mailing Address 3019 SAN ANSELIN	E AVE		05 31 YYYY 2009
City LONG BEACH	State CA	Zip Code 90808	Transaction ID: PR10366682945 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer Pacific Life	Occupation SYSTEM	n IS ANALYSIS SUPR	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Monthly)
SUBTOTAL of Receipts This Page (optional)	1		150.00

SCHEDULE A (FEO	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 54 (check only one) X
Any information copied from s or for commercial purposes, o	ther than using the name and a	ay not be sold or used by any persond ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	Company Political Action (Committee	
Full Name (Last, First, Mid MR. KENNETH W COX			Date of Receipt
Mailing Address 570 EE		7. 0 1	05 31 2009
City CORONA	State CA	Zip Code 92880	Transaction ID: PR10366702945 Amount of Each Receipt this Period
FEC ID number of contributed rederal political committee.		92000	50.00
Name of Employer Pacific Life	Occupati IT DELI	ion VERY MGR	
Receipt For: Primary Ge Other (specify) ▼		te Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
Full Name (Last, First, Mid	dle Initial)		Date of Receipt
Mailing Address 385 25	TH AVE		05 31 2009
City	State	Zip Code	Transaction ID: PR10366722945
MILTON	WA	98354	Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	uting C		50.00
Name of Employer Pacific Life	Occupati SR WH	on OLESALER	
Receipt For: Primary Ge Other (specify) ▼	Aggrega	te Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
Full Name (Last, First, Mid MR. DAVID C HONERKAMF	,		Date of Receipt
Mailing Address 2712 L	IGHTHOUSE LN		05 31 2009
CORONA DEL MAR	State CA	Zip Code	Transaction ID: PR10366762945
CORONA DEL MAR FEC ID number of contributed federal political committee.	uting	92625	Amount of Each Receipt this Period 50.00
Name of Employer Pacific Life	Occupati AVP RE	on E ACQUISITIONS	
Receipt For: Primary Ge Other (specify) ▼		te Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
SUBTOTAL of Receipts Thi	s Page (optional)		150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 54 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Polit	Statements may not be sold or used by any personal name and address of any political committee to ical Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)		
MS. LINDA L KOTOWICZ Mailing Address 795 TREPHANNY LN	I	Date of Receipt 0 5 3 1 2 0 0 9
City	State Zip Code	Transaction ID: PR10366792945
WAYNE	PA 19087	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer Pacific Life	Occupation FVP M MKTG	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	P/R Deduction (\$60.00 Mon- thly)
Full Name (Last, First, Middle Initial) MS. DAWN M TRAUTMAN		Date of Receipt
Mailing Address 7424 CITY LIGHTS D)R	05 31 7 2009
City	State Zip Code	Transaction ID: PR10366862945
ALISO VIEJO	CA 92656	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer Pacific Life	Occupation VP INFO TCH & PRG MGT	
Receipt For: Primary General	Aggregate Year-to-Date ▼	B/B B 1 1 1 1 1 1 1 1 1
Other (specify)	425.00	P/R Deduction (\$85.00 Mon- thly)
Full Name (Last, First, Middle Initial) MR. JEFFREY R WILT		Date of Receipt
Mailing Address 1 BAILEY DRIVE		05 31 2009
City	State Zip Code	Transaction ID: PR10366882945
GLENWOOD	NJ 07418	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	55.00
Name of Employer Pacific Life	Occupation FIELD VICE PRES	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	P/R Deduction (\$55.00 Monthly)
SUPTOTAL of Possinte This Page (entional)		200.00

	EDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 54 (check only one) X
or for c	formation copied from such Reports and commercial purposes, other than using the ME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ \	cific Life Insurance Company Polit	ical Action C	ommittee	
. <u>MR</u>	I Name (Last, First, Middle Initial) STUART A HOLLAND			Date of Receipt
	iling Address 4931 CAREFREE TR		7:s Oada	05 31 2009
City	/ \RKER	State CO	Zip Code 80134	Transaction ID: PR10366912945 Amount of Each Receipt this Period
FE	C ID number of contributing eral political committee.	C	00104	75.00
Nar Pad	me of Employer cific Life	Occupation SR FVP-		
Red	ceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	P/R Deduction (\$75.00 Mon-thly)
	Name (Last, First, Middle Initial) JAMES M RUGGERIO	1		Date of Receipt
Mai	iling Address 449 SAINT ANNES D	R		05 31 2009
City		State	Zip Code	Transaction ID: PR10367082945
FE	RMINGHAM C ID number of contributing eral political committee.	C	35244	Amount of Each Receipt this Period 65.00
Nar Pad	me of Employer cific Life	Occupation SR WHC	n DLESALER	
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	P/R Deduction (\$65.00 Mon-thly)
	I Name (Last, First, Middle Initial)	1		Date of Receipt
Mai	iling Address 25252 NORTHRUP D	PR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: PR10367122945
FE	GUNA HILLS C ID number of contributing eral political committee.	CA	92653	Amount of Each Receipt this Period 50.00
Nar Pad	me of Employer cific Life	Occupation AVP AG	n G & INS RISK MGT	
Rec	ceipt For: Primary General Other (specify) ▼	_ '	e Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
SUBT	**OTAL of Receipts This Page (optional) .			190.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 54 (check only one) X
A 0	ny information copied from such Reports and r for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Pacific Life Insurance Company Politi	ical Action C	ommittee	
۱.	Full Name (Last, First, Middle Initial) MR. JIM Y CHU			Date of Receipt
	Mailing Address 120 ALBERT PL APT	10		05 31 7 2009
	City	State	Zip Code	Transaction ID: PR10367142945
	COSTA MESA	CA	92627	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer Pacific Life	Occupation AVP PRO	n OD DESIGN	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		400.00	P/R Deduction (\$80.00 Mon-thly)
_	Full Name (Last, First, Middle Initial) MR. STEVEN H GOLDBERG	1		Date of Receipt
	Mailing Address 11 TWIN FLOWER S	Т		05 31 YYYY 2009
	City	State	Zip Code	Transaction ID: PR10367182945
	LADERA RANCH	CA	92694	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Pacific Life	Occupation DIR ANN	n NUITIES PRODUCT DEVELF	PMT
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	P/R Deduction (\$50.00 Mon- thly)
_	Full Name (Last, First, Middle Initial) MR. ROBERT J AVELLINO			Date of Receipt
	Mailing Address 3 PHEASANT DR.			05 31 2009
	City	State	Zip Code	Transaction ID: PR10614782945
	MT. LAUREL	NJ	08054	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Pacific Life	Occupation SR WHC	n DLESALER	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼	0 0	250.00	P/R Deduction (\$50.00 Mon- thly)
Г	SUBTOTAL of Receipts This Page (optional) .			180.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 54 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persue name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Pacific Life Insurance Company Polit	ical Action Committee	
Full Name (Last, First, Middle Initial) MR. CARLETON J MUENCH		Date of Receipt
Mailing Address 510 SAN NICHOLAS	СТ	05 31 2009
City	State Zip Code	Transaction ID: PR10614832945
LAGUNA BEACH	CA 92651	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.00
Name of Employer Pacific Life	Occupation AVP INVESTMENT OVERSIGHT	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	225.00	P/R Deduction (\$45.00 Mon-thly)
Full Name (Last, First, Middle Initial) MR. TIM N SHAHEEN		Date of Receipt
Mailing Address 28 STONE PNE		05 31 2009
City	State Zip Code	Transaction ID: PR10614872945
ALISO VIEJO	CA 92656	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Pacific Life	Occupation AVP SLS & MKTG OPS	
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	250.00	P/R Deduction (\$50.00 Mon-thly)
Full Name (Last, First, Middle Initial) MR. MATTHEW WELLS		Date of Receipt
Mailing Address 120 BONITA DR		05 31 YYYYY 2009
City	State Zip Code	Transaction ID: PR10614922945
HOMEWOOD	AL 35209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Pacific Life	Occupation SR WHOLESALER	
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	500.00	P/R Deduction (\$100.00 Monthly)
SUBTOTAL of Receipts This Page (optional)	1	195.00

SCHEDULE A (FEC FITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48/54 (check only one)
Any information copied from such or for commercial purposes, other	Reports and Statements may than using the name and add	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In F Pacific Life Insurance Co	ull)		
Full Name (Last, First, Middle MR. DAVID J VAN DE WATER	Initial)		Date of Receipt
Mailing Address 6433 PAL	OMINO WAY		05 31 2009
City	State	Zip Code	Transaction ID: PR11106892945
WEST LINN FEC ID number of contributing federal political committee.	OR C	97068	Amount of Each Receipt this Period 50.00
Name of Employer Pacific Life	Occupation MARKET	ING CONSULTANT	
Receipt For: Primary Gener Other (specify) ▼		Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Mon-thly)
Full Name (Last, First, Middle MS. ANN E FARLEY	Initial)		Date of Receipt
Mailing Address 4014 ALA	DDIN DR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City HUNTINGTON BEACH	State CA	Zip Code 92649	Transaction ID: PR11323352945 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		32040	45.00
Name of Employer Pacific Life	Occupation AVP PRO	DUCT DEV	
Receipt For: Primary Gener Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00	P/R Deduction (\$45.00 Mon-thly)
Full Name (Last, First, Middle MS. JENNIFER R JEWETT	Initial)		Date of Receipt
Mailing Address 31901 VII	RGINIA WAY		05 31 2009
City	State	Zip Code	Transaction ID: PR12361942945
LAGUNA BEACH FEC ID number of contributing federal political committee.	CA C	92651	Amount of Each Receipt this Period 65.00
Name of Employer Pacific Life	Occupation AVP INVE	EST CNSL	
Receipt For: Primary Gener Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	P/R Deduction (\$65.00 Mon-thly)
SUBTOTAL of Receipts This Pa	nge (ontional)		160.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee t	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Poli	tical Action Committee	
Full Name (Last, First, Middle Initial) MS. RAE A CAPPS		Date of Receipt
Mailing Address 25842 DANA BLF W		05 31 2009
City CAPISTRANO BEACH	State Zip Code CA 92624	Transaction ID: PR22130712945 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	65.00
Name of Employer Pacific Life	Occupation AVP LEGAL	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	P/R Deduction (\$65.00 Mon-thly)
Full Name (Last, First, Middle Initial) MR. EDWIN J FERRELL		Date of Receipt
Mailing Address 34 CASTLEROCK		05 31 7 2009
City IRVINE	State Zip Code CA 92603	Transaction ID: PR22130752945
FEC ID number of contributing federal political committee.	C 32003	Amount of Each Receipt this Period 85.00
Name of Employer Pacific Life	Occupation VP CREDIT ANALYSIS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	P/R Deduction (\$85.00 Mon-thly)
Full Name (Last, First, Middle Initial) MS. JENNIFER L KRUMM		Date of Receipt
Mailing Address 654 QUAIL MEADON	V	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City IRVINE	State Zip Code CA 92603	Transaction ID: PR22130802945
FEC ID number of contributing federal political committee.	CA 92005	Amount of Each Receipt this Period 45.00
Name of Employer Pacific Life	Occupation DIR INV ACCTG & RPTG	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	P/R Deduction (\$45.00 Mon-thly)
SUBTOTAL of Receipts This Page (optional)		195.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	for e	separate schedule(s) ach category of the iled Summary Page	FOR LINE NUMBER: PAGE 50 / 54 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be the name and address of	sold or used by any perso any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
· · ·	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Political Action Committee				
Full Name (Last, First, Middle Initial) MS. SUSAN MELEIKA					
Mailing Address 233 ROBIN HOOD	PLACE		05 31 2009		
City	State Zip	Code	Transaction ID: PR22130822945		
COSTA MESA	CA 92	627	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		45.00		
Name of Employer Pacific Life	Occupation DIR INV ACCTO	G & RPTG			
Receipt For:	Aggregate Year-to	-Date ▼			
Primary General Other (specify) ▼		225.00	P/R Deduction (\$45.00 Mon- thly)		
Full Name (Last, First, Middle Initial) MR. TIMOTHY C MYERS			Date of Receipt		
Mailing Address 23819 CLAYMORE	05				
City	· .	Code	Transaction ID: PR22130862945		
VALENCIA	CA 91	354	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		75.00		
Name of Employer Pacific Life	Occupation CORP TAX DIR				
Receipt For: Primary General	Aggregate Year-to	-Date ▼	D/D D 1 1 1075 00 M		
Other (specify)		375.00	P/R Deduction (\$75.00 Mon- thly)		
Full Name (Last, First, Middle Initial) MR. RICHARD J MILLER			Date of Receipt		
Mailing Address 2628 RYCROFT CT			05 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	·	Code	Transaction ID: PR31736842945		
CHESTERFIELD	MO 63	017	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		50.00		
Name of Employer Pacific Life	Occupation REGIONAL VP				
Receipt For:	Aggregate Year-to	-Date ▼			
Primary ☐ General Other (specify) ▼		250.00	P/R Deduction (\$50.00 Mon- thly)		
SUBTOTAL of Receipts This Page (optional)		170.00		
TOTAL This Period (last page this line numb	,	•	22191.98		

Transacti	PAGE 51 / 54
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Friends of Sherrod Brown Mailing Address 2280 Kresge Drive, Suite 800 City State Zip Code OH 44001 Purpose of Disbursement Contribution Candidate Name Sherrod Brown Mailing Address P.O. Box 905 City State Zip Code OH 44001 Purpose of Disbursement Contribution Candidate Name Sherrod Brown Mailing Address P.O. Box 905 City State Zip Code OH 44001 Transacti Date of Disbursement Contribution Candidate Name Rep. Scott Garrett For Congress Mailing Address P.O. Box 905 City State Zip Code NJ 07860 Purpose of Disbursement Contribution Candidate Name Rep. Scott Garrett Office Sought: House President State: NJ District: Other (specify) ▼ Transacti Date of Disbursement Contribution Candidate Name Rep. Scott Garrett Office Sought: House President State: NJ District: 05 Full Name (Last, First, Middle Initial) Scott Garrett Office Sought: Senate President State: NJ District: 05 Full Name (Last, First, Middle Initial) Scott Garrett Office Sought: Senate President State: NJ District: 05 Full Name (Last, First, Middle Initial) Scott Garrett Office Sought: Amount of NJ O7860 Purpose of Disbursement Contribution Transacti Date of Disbursement Contribution Transacti Date of Disbursement Contribution City State Zip Code VA 22307 Amount of Amount of Other (specify) Type Contribution Other (specify) Type Contribution	23 24 25 28b 28c 29
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Friends of Sherrod Brown Mailing Address 2280 Kresge Drive, Suite 800 City Amherst OH 44001 Purpose of Disbursement Contribution Candidate Name Sherrod Brown Office Sought: Nessident State Verification (State Contribution) Scott Garrett For Congress Mailing Address P.O. Box 905 City Newton State Verification (State Verification) Candidate Name Rep. Scott Garrett Office Sought: Newton NJ 07860 Purpose of Disbursement Contribution Candidate Name Rep. Scott Garrett Office Sought: Newton NJ 07860 Purpose of Disbursement Contribution Candidate Name Rep. Scott Garrett Office Sought: Newton NJ 07860 Purpose of Disbursement Contribution Candidate Name Rep. Scott Garrett Office Sought: Newton NJ 07860 Purpose of Disbursement Contribution Candidate Name Rep. Scott Garrett Office Sought: Newton NJ 07860 Purpose of Disbursement Contribution Candidate Name Rep. Scott Garrett Office Sought: Newton NJ 07860 Purpose of Disbursement Contribution Candidate Name Rep. Scott Garrett Office Sought: Newton NJ 07860 Purpose of Disbursement Contribution Candidate Name Rep. Scott Garrett Office Sought: Newton NJ 07860 Transactic NA 22007 Amount of NJ 07860 Amount of NJ 07860 Amount of NJ 07860 Amount of NJ 07860 Transactic NA 22007 Amount of NJ 07860 Disbursement NJ 07860 Amount of NJ 07860 Amount of NJ 07860 Disbursement NJ 07860 Amount of NJ 07860 Disbursement NJ 07860 Amount of NJ 07860 Disbursement NJ 07860 Disbursement NJ 07860 Disbursement NJ 07860 Disbursement NJ 07860 Disbur	
Transacti	
Mailing Address 2280 Kresge Drive, Suite 800 0 5	on ID: 7876432 sbursement
Amherst OH 44001 Purpose of Disbursement Contribution Candidate Name Sherrod Brown Office Sought: House X Senate President State: OH District: Full Name (Last, First, Middle Initial) Scott Garrett For Congress Mailing Address P.O. Box 905 City State Zip Code NJ 07860 Purpose of Disbursement Contribution Candidate Name Rep. Scott Garrett Office Sought: X House President Senate President State: NJ District: 05 Full Name (Last, First, Middle Initial) Senate President Senate President State: NJ District: 05 Full Name (Last, First, Middle Initial) Friends of Chris Dodd Mailing Address 1602 Belle View Blvd., #510 City State Zip Code Amount of Contribution Candidate Name Rep. Scott Garrett Other (specify) ▼ Transacti Date of Disbursement Contribution Contribution Candidate Name Rep. Scott Garrett Other (specify) ▼ Amount of No. More State Sip Code Date of Disbursement Contribution Contribution Contribution Amount of No. More State Sip Code Date of Disbursement Contribution City State Zip Code Date of Disbursement Contribution Amount of No. More State Sip Code Date of Disbursement Contribution Amount of Disbursement Contribution City State Zip Code Date of Disbursement Contribution Amount of Date of Disbursement Contribution City State Zip Code Date of Disbursement Contribution Amount of Date of Disbursement Contribution	$\begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y$
Contribution Candidate Name Sherrod Brown Office Sought: House President Name	Each Disbursement this Perio
Sherrod Brown Office Sought:	1000.00
X Senate President State: OH District: Full Name (Last, First, Middle Initial) Scott Garrett For Congress Mailing Address P.O. Box 905 City Newton Purpose of Disbursement Contribution Candidate Name Rep. Scott Garrett President State: NJ District: 05 Full Name (Last, First, Middle Initial) Cardidate Name Rep. Scott Garrett Other (specify) Frimary General Date of Di M5 M Amount of Category/ Type Contribut Category/ Type	
Full Name (Last, First, Middle Initial) Scott Garrett For Congress Mailing Address P.O. Box 905 City Newton Number State Zip Code Number Nu	on
Mailing Address P.O. Box 905 City State Zip Code Newton NJ 07860 Purpose of Disbursement Contribution Candidate Name Rep. Scott Garrett Office Sought: X House Senate President President State: NJ District: 05 Full Name (Last, First, Middle Initial) Friends of Chris Dodd Mailing Address 1602 Belle View Blvd., #510 City State Zip Code Amount of M5 M Contribution City State Zip Code Amount of M5 M Contribution City State Zip Code Amount of M5 M Contribution City State Zip Code Amount of M6 M Contribution City State Zip Code Amount of M6 M Contribution City State Zip Code Amount of M6 M Contribution City State Zip Code Amount of M6 M Contribution City Office Sought: X House Disbursement Contribution City State Zip Code Amount of M6 M Contribution City Office Sought: X House Disbursement Contribution City Office Sought: X House Disbursement Contribution Contribution Contribution Contribution Office Sought: X House Disbursement Contribution Contribution Contribution Contribution Office Sought: X House Category/Type Contribution Contribution Contribution Office Sought: X House Category/Type Contribution Contribution Contribution Office Sought: X House Category/Type Cate	on ID: 7876433 sbursement
Newton Purpose of Disbursement Contribution Candidate Name Rep. Scott Garrett Office Sought: X House Senate President State: NJ District: 05 Full Name (Last, First, Middle Initial) Friends of Chris Dodd Mailing Address 1602 Belle View Blvd., #510 City State Zip Code Alexandria VA 22307 Purpose of Disbursement Contribution NJ 07860 Other (specify) Category/ Type Contribut Contribut Category/ Type Contribut Contribut Alexandria Zip Code VA 22307 Amount of Contribution	$\begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & D & D & Y \end{bmatrix}$
Contribution Candidate Name Rep. Scott Garrett Office Sought: X House Senate President State: NJ District: 05 Full Name (Last, First, Middle Initial) Friends of Chris Dodd Mailing Address 1602 Belle View Blvd., #510 City Alexandria Purpose of Disbursement Contribution Other (specify) Transacti Date of Di May State VA 22307 Amount of Contribution	Each Disbursement this Perio
Rep. Scott Garrett Office Sought: X House Senate President State: NJ District: 05 Full Name (Last, First, Middle Initial) Friends of Chris Dodd Mailing Address 1602 Belle View Blvd., #510 City State Zip Code Alexandria VA 22307 Purpose of Disbursement Contribution Transacti Date of Disbursement Contribution Amount of Contribution	1000.00
Senate	
Friends of Chris Dodd Mailing Address 1602 Belle View Blvd., #510 City State Zip Code Alexandria VA 22307 Purpose of Disbursement Contribution The Contribution Date of Discourse Blvd., #510 Amount of Discourse Blvd., #510	ion
City State Zip Code Amount of VA 22307 Purpose of Disbursement Contribution 011	on ID: 7876434 sbursement
Alexandria VA 22307 Purpose of Disbursement Contribution 011	$\begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y & Y & 2 & 0 & 0 & 9 \\ & 2 & 0 & 0 & 9 \end{bmatrix}$
Contribution 011	Each Disbursement this Perio
Candidate Name	2000.00
Christopher Dodd Type	
Office Sought: House Disbursement For: 2010 Contribut X Senate President Other (specify) ▼	on
State: CT District:	

ITE	HEDULE R (FE	-	Use sepa	arate schedule(s)		NUMBER: PAGE 52 / 54
	EMIZED DISBUF	RSEMENTS	for each	category of the Summary Page	(check only	y one) 22 X 23 24 25 28a 28b 28c 29 3
					d by any person f	for the purpose of soliciting contributions
			e name and addre	ss of any political	committee to so	licit contributions from such committee
`	NAME OF COMMITTEE Pacific Life Insurance	, ,	ical Action Com	nmittee		
	Full Name (Last, First, M LINDA SANCHEZ FC					Transaction ID: 7876435 Date of Disbursement
Ī	Mailing Address 134	16 Telegraph R	oad			$\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$
	City Whittier		State CA	Zip Code 90605		Amount of Each Disbursement this Period
(Purpose of Disbursemen Contribution	i 			011	5000.00
	Candidate Name Linda Sanchez	1 50			Category/ Type	
(enate resident	sbursement For: X Primary Other (spe	2010 General		Contribution
	State: CA Distri					
	Full Name (Last, First, M Bennett Election Com	,				Transaction ID: 7882181 Date of Disbursement
Ī	Mailing Address 175 South West Temple Suite 650					$\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & Z & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & Y \\ Z & Q & Q & Q & Y \end{bmatrix}$
	City Salt Lake City		State UT	Zip Code 84101		Amount of Each Disbursement this Period
	Purpose of Disbursemen Contribution	t			011	1000.00
	Candidate Name Sen. Robert Bennett				Category/ Type	
	X Se	enate resident	sbursement For: X Primary Other (spe	2010 General		Contribution
,	State: UT Distriction District					Transaction ID: 7882183
	(=====, ==,	,				Date of Disbursement
	Friends of Dennis Ca					M_M / D D / Y Y Y Y
	Mailing Address 200	East Jefferson	Street			05 27 2009
- - (Mailing Address 200 City Falls Church	East Jefferson	Street State VA	Zip Code 22046		Amount of Each Disbursement this Period
- - (- - - -	Mailing Address 200 City Falls Church Purpose of Disbursemen Contribution	East Jefferson	State		011	
 	Mailing Address 200 City Falls Church Purpose of Disbursemen Contribution Candidate Name Dennis Cardoza	East Jefferson	State VA	22046	011 Category/ Type	Amount of Each Disbursement this Period
	Mailing Address 200 City Falls Church Purpose of Disbursemen Contribution Candidate Name Dennis Cardoza Office Sought: X H	East Jefferson t Discourse Discourse Penate Penate Pesident	State	2010 General	Category/	Amount of Each Disbursement this Period

ΙT		Use separate schedule			R LINE I eck only	one)						
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Pag		\Box	21b 27	22 28a	X 23 28b		24 28c		25 29	2
	y Information copied from such Reports and Stater for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Political A	e and address of any politi										
\mathbb{L}												
	Full Name (Last, First, Middle Initial) Carper for Senate	0 5				Date of	Disbu	-			ó9	1
	Mailing Address 19 East Commons Blvd	Second Floor				0.0		- 1			0 0	_
	City New Castle	State Zip Code DE 19720				Amoun	t of Ea	ch Dis	burse	ment t	his Pe	riod
	Purpose of Disbursement Contribution Candidate Name O11 Category/					_		•		1000	0.00	
	Thomas Carper			Туре								
	X Senate X President	ement For: 2012 Primary General Other (specify)	al			Contrib	oution					
_	State: DE District: Full Name (Last, First, Middle Initial)								,0001	0.5		
	Friends of Congressman George Miller					Transa Date of	Disbu	rseme			Y - Y	7
	Mailing Address 301 4th Street, NE, Suite	202				0.5		27	L	2 0	ŏ9	_
	City Washington	State Zip Code DC 20002				Amoun	t of Ea	ch Dis	burse			riod
	Purpose of Disbursement Contribution			011				•		1000	0.00	
			┧╘	atann								
	Candidate Name George Miller		- 1	atego Type	,							
	Candidate Name George Miller Office Sought: X House Disburs	ement For: 2010 Primary General Other (specify)		_	,	Contrib	oution					
	Candidate Name George Miller Office Sought: X House Senate President Disburs: X	Primary General		_	,	Transa Date of	ction I	rseme				_
	Candidate Name George Miller Office Sought: X House Senate X President State: CA District: 07 Full Name (Last, First, Middle Initial)	Primary General		_	,	Transa	ction I	-			ý 9 [°]]
	Candidate Name George Miller Office Sought: X House Senate President State: CA District: 07 Full Name (Last, First, Middle Initial) Moore for Congress	Primary General		_	,	Transa Date of	ction I	rseme	ent / Y	ž 0		
	Candidate Name George Miller Office Sought: X House Senate President State: CA District: 07 Full Name (Last, First, Middle Initial) Moore for Congress Mailing Address PO Box 14631 City	Primary General Other (specify) ▼ State Zip Code		_	3	Transa	ction I	rseme	ent / Y	ž 0	his Pe	
	Candidate Name George Miller Office Sought: X House Senate President State: CA District: 07 Full Name (Last, First, Middle Initial) Moore for Congress Mailing Address PO Box 14631 City Shawnee Mission Purpose of Disbursement	Primary General Other (specify) ▼ State Zip Code	al C	Type 011 atego	ory/	Transa	ction I	rseme	ent / Y	2 0	his Pe	
	Candidate Name George Miller Office Sought: X House Senate President State: CA District: 07 Full Name (Last, First, Middle Initial) Moore for Congress Mailing Address PO Box 14631 City Shawnee Mission Purpose of Disbursement Contribution Candidate Name Dennis Moore Office Sought: X House Disburs	Primary General Other (specify) ▼ State Zip Code	al C	Type 011	ory/	Transa	ction I	rseme	ent / Y	2 0	his Pe	

В.

District: 47

-9	2000 100 1101			
S	CHEDULE B (FEC Form 3X)	Use separate schedule(21 -	NUMBER: PAGE 54/54
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(Crieck onli	y one) 22 X 23 24 25 26 28a 28b 28c 29 30b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			
\rangle	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Political A	ction Committee		
	Full Name (Last, First, Middle Initial)			Transaction ID: 7882187
	Royce Campaign Committee			Date of Disbursement
	Mailing Address PO Box 2525			$ \begin{bmatrix} M & M \\ 0 & 5 \end{bmatrix} \begin{bmatrix} D & 2 & 7 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$
	City	State Zip Code		Amount of Each Disbursement this Period
	Orange	CA 92859		
	Purpose of Disbursement Contribution		011	2000.00
	Candidate Name Edward Royce		Category/ Type	
		ment For: 2010 Primary General Other (specify)		Contribution
	Full Name (Last, First, Middle Initial)			Transaction ID: 7882188
	The Committee to Re-Elect Loretta Sanche	ez		Date of Disbursement
	Mailing Address 604 South Harbor Boulev	rard		05 7 27 7 2009
		State Zip Code CA 92704		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution		011	1000.00
	Candidate Name Loretta Sanchez		Category/ Type	
	X III	ment For: 2010 Primary General Other (specify) ▼		Contribution

SUBTOTAL of Disbursements This Page (optional)	•	3000.00
TOTAL This Period (last page this line number only)	•	18000.00

State: CA